

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Full Name (Last, First, Middle Initial)

A. Geoffrey Emerson

Mailing Address 710 E 24th St Ste 304

City

Minneapolis

State

MN

Zip Code

55404-3846

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Ophthalmologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2015

Transaction ID : 3D0F9F4B-C72E-4F07-A

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Fred Evans

Mailing Address 1064 Stormy Terrace

City

Pensacola

State

FL

Zip Code

32503

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

ophthalmologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 07415B6A-C0EE-4396-A

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Stan Feil

Mailing Address 112 N Akers St Ste A

City

Visalia

State

CA

Zip Code

93291-5121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Ophthalmologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : 500A8F75-5540-4495-9

Amount of Each Receipt this Period

83.37

SUBTOTAL of Receipts This Page (optional)..... ►

633.37

TOTAL This Period (last page this line number only)..... ►